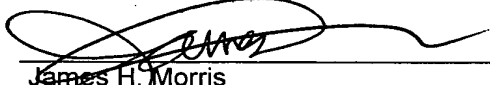
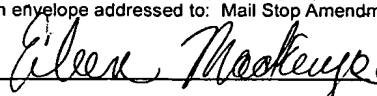




TFW 2635 \$

| AMENDMENT TRANSMITTAL LETTER   |                                  |   |                             | Docket No.<br>S1022.80152US00 |               |
|--|----------------------------------|---|-----------------------------|-------------------------------|---------------|
| Application No.<br>. 09/194796-Conf. #3615   |                                  | Filing Date<br>December 1, 1998   |                             | Examiner<br>B. A. Zimmerman   |               |
|  |                                  |   |                             | Art Unit<br>2635              |               |
| Applicant(s): Peter John Hulme   |                                  |   |                             |                               |               |
| Invention: A METHOD FOR REMOTELY CONTROLLING A PLURALITY OF APPARATUS USING A SINGLE REMOTE CONTROL DEVICE   |                                  |   |                             |                               |               |
| <b>TO THE COMMISSIONER FOR PATENTS</b>   |                                  |   |                             |                               |               |
| Transmitted herewith is a Request for Reconsideration in the above-identified application.<br>The fee has been calculated and is transmitted as shown below.   |                                  |   |                             |                               |               |
| <b>CLAIMS AS AMENDED</b>   |                                  |   |                             |                               |               |
|  | Claims Remaining After Amendment | Highest Number Previously Paid  | Number Extra Claims Present | Rate                          |               |
| Total Claims   |                                  | - 20 =  |                             | x                             |               |
| Independent Claims   |                                  | - 3 =   |                             | x                             |               |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/>   |                                  |   |                             |                               |               |
| Other fee (please specify): Extension for response within first month  |                                  |   |                             |                               | 120.00        |
| <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>  |                                  |   |                             |                               | <b>120.00</b> |
| <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity   |                                  |   |                             |                               |               |
| <input type="checkbox"/> No additional fee is required for this amendment.   |                                  |   |                             |                               |               |
| <input type="checkbox"/> Please charge Deposit Account No. <u>23/2825</u> in the amount of \$ _____<br>A duplicate copy of this sheet is enclosed.   |                                  |   |                             |                               |               |
| <input checked="" type="checkbox"/> A check in the amount of \$ <u>120.00</u> to cover the filing fee is enclosed.   |                                  |   |                             |                               |               |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  |                                  |   |                             |                               |               |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>23/2825</u><br>as described below. A duplicate copy of this sheet is enclosed.   |                                  |   |                             |                               |               |
| <input checked="" type="checkbox"/> Credit any overpayment.  |                                  |   |                             |                               |               |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.   |                                  |   |                             |                               |               |
| <br>James H. Morris<br>Attorney Agent Reg. No.: 34,681<br>WOLF, GREENFIELD & SACKS, P.C.<br>Federal Reserve Plaza<br>600 Atlantic Avenue<br>Boston, Massachusetts 02210-2206<br>(617) 646-8227  |                                  |   |                             | Dated: <u>March 9, 2006</u>   |               |
| <b>Certificate of Mailing Under 37 CFR 1.8(a)</b>  |                                  |   |                             |                               |               |
| I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. |                                  |   |                             |                               |               |
| Dated: <u>March 9, 2006</u>  |                                  | Signature:  (Eileen M. MacKenzie) |                             |                               |               |



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

|   |  |                          |                       |
|---|--|--------------------------|-----------------------|
| <b>Effective on 12/08/2004.</b><br><b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b><br><b>FEE TRANSMITTAL</b><br><b>For FY 2005</b> |  | <b>Complete if Known</b> |                       |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |  | Application Number       | 09/194796-Conf. #3615 |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 120.00  |  | Filing Date              | December 1, 1998      |
|   |  | First Named Inventor     | Peter John Hulme      |
|   |  | Examiner Name            | B. A. Zimmerman       |
|   |  | Art Unit                 | 2635                  |
|   |  | Attorney Docket No.      | S1022.80152US00       |

|   |   |
|---|---|
| <b>METHOD OF PAYMENT (check all that apply)</b>   |   |
| <input checked="" type="checkbox"/> Check   | <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ |
| <input type="checkbox"/> Deposit Account  | Deposit Account Number: <u>23/2825</u> Deposit Account Name: <u>Wolf, Greenfield &amp; Sacks, P.C.</u>  |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                |   |
| <input type="checkbox"/> Charge fee(s) indicated below  | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee   |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments   |

|   |                     |   |                              |                              |                                  |                       |                 |
|---|---------------------|---|------------------------------|------------------------------|----------------------------------|-----------------------|-----------------|
| <b>FEE CALCULATION</b>  |                     |   |                              |                              |                                  |                       |                 |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |   |                              |                              |                                  |                       |                 |
| <b>Application Type</b>   | <b>Fee (\$)</b>     | <b>FILING FEES</b>                                      | <b>SEARCH FEES</b>           | <b>EXAMINATION FEES</b>      |                                  | <b>Fees Paid (\$)</b> |                 |
|   |                     | <b>Small Entity Fee (\$)</b>                            | <b>Small Entity Fee (\$)</b> | <b>Small Entity Fee (\$)</b> | <b>Small Entity Fee (\$)</b>     |                       |                 |
| Utility   | 300                 | 150   | 500                          | 250                          | 200                              | 100                   |                 |
| Design  | 200                 | 100   | 100                          | 50                           | 130                              | 65                    |                 |
| Plant   | 200                 | 100   | 300                          | 150                          | 160                              | 80                    |                 |
| Reissue   | 300                 | 150   | 500                          | 250                          | 600                              | 300                   |                 |
| Provisional   | 200                 | 100   | 0                            | 0                            | 0                                | 0                     |                 |
| <b>2. EXCESS CLAIM FEES</b>   |                     |   |                              |                              |                                  |                       |                 |
|   |                     |   |                              |                              |                                  | <b>Small Entity</b>   |                 |
| <b>Fee Description</b>  |                     |   |                              |                              |                                  | <b>Fee (\$)</b>       | <b>Fee (\$)</b> |
| Each claim over 20 (including Reissues)   |                     |   |                              |                              |                                  | 50                    | 25              |
| Each independent claim over 3 (including Reissues)  |                     |   |                              |                              |                                  | 200                   | 100             |
| Multiple dependent claims   |                     |   |                              |                              |                                  | 360                   | 180             |
| <b>Total Claims</b>   |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>              | <b>Fee Paid (\$)</b>         | <b>Multiple Dependent Claims</b> |                       |                 |
| _____ - 20 = _____  |                     | x _____   | = _____                      |                              | <b>Fee (\$)</b>                  | <b>Fee Paid (\$)</b>  |                 |
| <b>Indep. Claims</b>  |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>              | <b>Fee Paid (\$)</b>         |                                  |                       |                 |
| _____ - 3 = _____   |                     | x _____   | = _____                      |                              |                                  |                       |                 |
| <b>3. APPLICATION SIZE FEE</b>  |                     |   |                              |                              |                                  |                       |                 |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                              |                              |                                  |                       |                 |
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> |                              | <b>Fee (\$)</b>              | <b>Fee Paid (\$)</b>             |                       |                 |
| _____ - 100 = _____   | /50                 | _____ (round up to a whole number) x _____              |                              | = _____                      |                                  |                       |                 |
| <b>4. OTHER FEE(S)</b>  |                     |   |                              |                              |                                  |                       |                 |
| Non-English Specification, \$130 fee (no small entity discount)   |                     |   |                              |                              |                                  | <b>Fees Paid (\$)</b> |                 |
| Other (e.g., late filing surcharge): <u>1251 Extension for response within first month</u>  |                     |   |                              |                              |                                  | 120.00                |                 |

|                     |                 |                                   |                |
|---------------------|-----------------|-----------------------------------|----------------|
| <b>SUBMITTED BY</b> |                 |                                   |                |
| Signature           |                 | Registration No. (Attorney/Agent) | 34,681         |
| Name (Print/Type)   | James H. Morris | Telephone                         | (617) 646-8227 |
|                     |                 | Date                              | March 9, 2006  |

|  |   |
|--|---|
| <b>Certificate of Mailing Under 37 CFR 1.8(a)</b>  |   |
| I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. |   |
| Dated: <u>March 9, 2006</u>  | Signature: <u>Eileen M. MacKenzie</u> (Eileen M. MacKenzie) |